REPORT - HIPAA 834 to ACES MMIS SSPS

SegID	HIPAA Name	Req	System	File	Field	Comment
	Benefit Enrollment and Maintenance		MMIS			Outbound to HMOs: Send "payment listing" of clients to HMOs.
ST	Transaction Set Header	R				
ST 01	Transaction Set Identifier Code	R	ACES			Hard code "834"
ST 01	Transaction Set Identifier Code	R	MMIS			Hard code "834"
ST 01	Transaction Set Identifier Code	R	SSPS			Hard code "834"
ST 02	Transaction Set Control Number	R	ACES			Generate a sequence number for each ST-SE in a batch.
ST 02	Transaction Set Control Number	R	MMIS			Sequence # start from 1 increment by 1 for each TS in a func group. ST02 and SE02 must be identical
ST 02	Transaction Set Control Number	R	SSPS			Generate unique ID for each ST-SE in a batch.
BGN	Beginning Segment	R				
BGN01	Transaction Set Purpose Code	R	ACES			Hard code "00"
BGN01	Transaction Set Purpose Code	R	MMIS			Hard code "00"-Original
BGN01	Transaction Set Purpose Code	R	SSPS			Hard code "00"
BGN02	Transaction Set Identifier Code	R	ACES			Verify this is a sequence number that begins with 1 and increments by 1
BGN02	Transaction Set Identifier Code	R	MMIS			Verify this is a sequence number that begins with 1 and increments by 1

SegID	HIPAA Name	Req	System	File	Field	Comment
BGN02	Transaction Set Identifier Code	R	SSPS			Verify this is a sequence number that begins with 1 and increments by 1.
BGN03	Transaction Set Creation Date	R	SSPS			Generate current system date
BGN04	Transaction Set Creation Time	R	SSPS			Generate current system time
BGN08	Action Code	R	ACES			Hard code "4"-Verify, for full roster
BGN08	Action Code	R	MMIS			Hard code "4"-Verify, for full roster
BGN08	Action Code	R	SSPS			MMIS will use Full Enrollment Only (Code Value = 4). Will SSPS use the same policy?
REF	Transaction Set Policy Number	s				
DTP	File Effective Date	s				
N 1	Sponsor Name	R				
N 1	Sponsor Name	R				
N 101	Entity Identifier Code	R	ACES			Hard code "P5"-plan sponsor
N 101	Entity Identifier Code	R	MMIS			Hard code "P5"-Plan Sponsor
N 102	Plan Sponsor Name	S	ACES			Hard code "Wash. State DSHS"
N 102	Plan Sponsor Name	S	MMIS			Hard code "Wash. State DSHS Medical Assistance Administration"
N 102	Plan Sponsor Name	S	SSPS	SSPS-Enrollment-RptUnit	Reporting_Unit_Title	
N 103	Identification Code Qualifier	R	ACES			Send "FI" with Tax ID
N 103	Identification Code Qualifier	R	MMIS			Hard code "FI"-Federal Taxpayer's ID
N 103	Identification Code Qualifier	R	SSPS			"FI"-Federal tax ID
N 104	Sponsor Identifier	R	ACES			Federal Tax ID that identifies ACES sponsor.
N 104	Sponsor Identifier	R	MMIS			Hard code MAA Tax ID number

SegID	HIPAA Name	Req	System	File	Field	Comment
N 104	Sponsor Identifier	R	SSPS			Federal Tax ID that identifies SSPS sponsor
N 1	Payer	R				
N 1	Payer	R				
N 101	Entity Identifier Code	R	ACES			Hard code "IN"-insurer
N 101	Entity Identifier Code	R	MMIS			Hard code "IN"-Insurer
N 101	Entity Identifier Code	R	SSPS			Hard code "IN"-insurer
N 102	Insurer Name	S	MMIS	Prov-File	PROV-NAME	
N 103	Identification Code Qualifier	R	MMIS			Send "XV" with NPI; send "FI" with TaxID
N 103	Identification Code Qualifier	R	SSPS			"FI"-Federal tax ID or "XV"- National Plan ID
N 104	Insurer Identification Code	R	MMIS	Prov-File	PROV-EMPLR-IDENT-NU	expand field to fit NPI or new field
N 104	Insurer Identification Code	R	MMIS	Prov-File	PROV-SS-NUM	expand field to fit NPI or new field
N 104	Insurer Identification Code	R	MMIS	Recip-Elig-File	PCOP-BILLING-PROV	expand field to fit NPI or new field
N 104	Insurer Identification Code	R	SSPS			Tax ID or Plan ID of "payer".
N 1	TPA/Broker Name	s				
N 1	TPA/Broker Name	s				
ACT	TPA/Broker Account Information	s				
ACT	TPA/Broker Account Information	s				
INS	Member Level Detail	R				
INS	Member Level Detail	R				
INS01	Insured Indicator	R	ACES			Will always be "Y" if subscriber is patient
INS01	Insured Indicator	R	MMIS			Will always be "Y" if subscriber is patient

SegID	HIPAA Name	Req	System	File	Field	Comment
INS01	Insured Indicator	R	SSPS			Will always be "Y" if subscriber is patient.
INS02	Individual Relationship Code	R	ACES			Hard code "18"-insured is subscriber
INS02	Individual Relationship Code	R	MMIS			Hard code "18"-insured is subscriber
INS02	Individual Relationship Code	R	SSPS			Hard code "18"-insured is subscriber
INS03	Maintenance Type Code	R	ACES			Hard code "030"-audit or compare, for full roster
INS03	Maintenance Type Code	R	MMIS			Hard code "030"-Audit or Compare, for full roster; or use "024" for termination?
INS03	Maintenance Type Code	R	SSPS			Hard code "030"-Audit or Compare, for full roster
INS04	Maintenance Reason Code	S	ACES			Hard code "XN"-notification only
INS04	Maintenance Reason Code	S	MMIS			Hard code "XN"-Notification Only
INS04	Maintenance Reason Code	S	SSPS			Hard code "XN"-Notification only
INS05	Benefit Status Code	R	ACES			Hard code "A"-active
INS05	Benefit Status Code	R	MMIS			Hard code "A"-Active
INS05	Benefit Status Code	R	SSPS			Hard code "A"-Active
INS08	Employment Status Code	S	ACES			Hard code "FT"-full time recipient
INS08	Employment Status Code	S	MMIS			Hard code "FT"-full time recipient
INS08	Employment Status Code	S	SSPS			Hard code "FT"-full time recipient
INS10	Handicap Indicator	S	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-DISAB- TYPE-CD	"Y" if field is not blank
INS10	Handicap Indicator	S	MMIS	Recip-Elig-File	RECIP-DISABLITY-COD	"Y" if field is not blank
INS10	Handicap Indicator	S	SSPS			Where is this captured in SSPS?

SegID	HIPAA Name	Req	System	File	Field	Comment
INS12	Insured Individual Death Date	S	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-DOD	
INS12	Insured Individual Death Date	S	MMIS	Recip-Elig-File	RECIP-DATE-OF-DEATH	
INS12	Insured Individual Death Date	S	SSPS			How are deaths managed in SSPS?
REF	Subscriber Number	R				
REF01	Reference Identification Qualifier	R	ACES			Hard code "0F"-subscriber number
REF01	Reference Identification Qualifier	R	MMIS			Hard code "0F"-subscriber number (DSHS PIC)
REF01	Reference Identification Qualifier	R	SSPS			Hard code "0F"-subscriber number
REF02	Subscriber Identifier	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-ACES-CL-ID- NUM	
REF02	Subscriber Identifier	R	MMIS	Recip-Elig-File	RECIP-IDENT-NUMBER	
REF02	Subscriber Identifier	R	SSPS	SSPS-Enrollment-AuthMain	Authorization_number	
REF02	Subscriber Identifier	R	SSPS	SSPS-Enrollment-AuthMain	Authorization_Suffix	
REF	Member Policy Number	s				
REF	Member Identification Number	s				
REF01	Reference Identification Qualifier	R	MMIS			Hard code "3H"=Case Number; "Q4"=Prior Identifier Number; "23"=client ID; "F6"=HIC
REF01	Reference Identification Qualifier	R	SSPS			Use "F6" with HIC, use "3H" with case number, use "DX" with CSO number, "23" with client's PIC.
REF02	Subscriber Supplemental Identifier	R	MMIS	Recip-Elig-File	ORIGINAL-RECIP-ID	
REF02	Subscriber Supplemental Identifier	R	MMIS	Recip-Elig-File	RECIP-CASE-NUMBER	
REF02	Subscriber Supplemental Identifier	R	MMIS	Recip-Elig-File	RECIP-CLIENT-ID	
REF02	Subscriber Supplemental Identifier	R	SSPS			Does SSPS store any of these IDs?
REF	Prior Coverage Months	S				

SegID	HIPAA Name	Req	System	File	Field	Comment
REF01	Reference Identification Qualifier	R	ACES			Hard code "QQ"-unit number
REF01	Reference Identification Qualifier	R	MMIS			Hard code "QQ"-unit number
REF02	Prior Coverage Month Count	R	ACES			Must maintian the number of prior covered months for Certificate of Creditable Coverage.
REF02	Prior Coverage Month Count	R	MMIS			Must maintain or compute the number of prior months covered (consecutive or not), for Certificate of Creditable Coverage
REF02	Prior Coverage Month Count	R	SSPS			Must maintain number of prior months covered, for Certificate of Creditable Coverage
DTP	Member Level Dates	s				
DTP01	Date Time Qualifier	R	ACES			Send "473" with recip-elig-beg- date; send "474" with recip-elig- end-date
DTP01	Date Time Qualifier	R	MMIS			For active client, send "473" and "474" with recip-elig-beg/end-date respectively; for termination, send "357" with recip-elig-end-date.
DTP01	Date Time Qualifier	R	SSPS			Send "473" with recip-elig-beg- date; send "474" with recip-elig- end-date
DTP03	Status Information Effective Date	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-AU-PROG-BEG- DT	Are these the dates the recipient first became eligible? as opposed to the current span in the coverage loop.
DTP03	Status Information Effective Date	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-AU-PROG-END- DT	Are these the dates the recipient first became eligible? as opposed to the current span in the coverage loop.
DTP03	Status Information Effective Date	R	MMIS	Recip-Elig-File	RECIP-ELIG-BEG-DATE	
DTP03	Status Information Effective Date	R	MMIS	Recip-Elig-File	RECIP-ELIG-END-DATE	

SegID	HIPAA Name	Req	System	File	Field	Comment
DTP03	Status Information Effective Date	R	SSPS	SSPS-Enrollment-AuthMain	Authortization_Date	
NM1	Member Name	R				
NM1	Member Name	R				
NM101	Entity Identifier Code	R	ACES			Hard code "IL"-insured
NM101	Entity Identifier Code	R	MMIS			Hard code "IL"-insured
NM101	Entity Identifier Code	R	SSPS			Hard code "IL"-insured
NM102	Entity Type Qualifier	R	SSPS			"1"-person
NM103	Subscriber Last Name	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-LAST-NAME	
NM103	Subscriber Last Name	R	MMIS	Recip-Elig-File	RECIP-LAST-NAME	Support up to 35 bytes
NM103	Subscriber Last Name	R	SSPS	SSPS-Enrollment-AuthMain	P_R_Name	
NM104	Subscriber First Name	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-FIRST- NAME	
NM104	Subscriber First Name	R	MMIS	Recip-Elig-File	RECIP-FIRST-NAME	Support up to 25 bytes
NM104	Subscriber First Name	R	SSPS	SSPS-Enrollment-AuthMain	P_R_Name	
NM105	Subscriber Middle Name	S	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-MIDDLE- INIT	
NM105	Subscriber Middle Name	S	MMIS	Recip-Elig-File	RECIP-MIDDLE-INIT	Support up to 25 bytes
NM105	Subscriber Middle Name	S	SSPS	SSPS-Enrollment-AuthMain	P_R_Name	
NM108	Identification Code Qualifier	S	MMIS			Hard code "34"-Social Security Number, until NII used
NM108	Identification Code Qualifier	S	SSPS			Hard code "34", until NII used
NM109	Subscriber Identifier	S	MMIS	Recip-Elig-File	RECIP-SS-NUMBER	
NM109	Subscriber Identifier	S	SSPS	SSPS-Enrollment-AuthMain	Social_Security_Number	
PER	Member Communications Numbers	S				
PER01	Contact Function Code	R	ACES			Hard code "IP"-insured

SegID	HIPAA Name	Req	System	File	Field	Comment
PER01	Contact Function Code	R	MMIS			Hard code "IP"-insured
PER04	Communication Number	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-AU-RES-TEL- AREA-NUM	
PER04	Communication Number	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-AU-RES-TEL- NUM	
PER04	Communication Number	R	MMIS	Recip-Elig-File	RECIP-PHONE-NUMBER	
N 3	Member Residence Street Address	S				
N 301	Subscriber Address Line	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-AU-ADDR-LINE- 1	-
N 301	Subscriber Address Line	R	MMIS	Recip-Elig-File	RECIP-ADDR-LINE-1	
N 302	Subscriber Address Line	S	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-AU-ADDR-LINE- 2	-
N 302	Subscriber Address Line	S	MMIS	Recip-Elig-File	RECIP-ADDR-LINE-2	
N 4	Member Residence City, State, ZIP Co	de S				
N 401	Subscriber City Name	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-AU-CTY-ADDR	
N 401	Subscriber City Name	R	MMIS	Recip-Elig-File	CITY_home	
N 402	Subscriber State Code	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-AU-ST-CD	
N 402	Subscriber State Code	R	MMIS	Recip-Elig-File	RECIP-ADDR-LINE-3	Parse for state
N 403	Subscriber Postal Zone or ZIP Code	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-AU-ZIP-ADDR	
N 403	Subscriber Postal Zone or ZIP Code	R	MMIS	Recip-Elig-File	RECIP-ZIP-CODE	
N 405	Location Qualifier	S	MMIS			Hard code "CY"-county
N 406	Location Identification Code	S	MMIS	Recip-Elig-File	RECIP-COUNTY-CODE	Support up to 30 bytes
DMG	Member Demographics	S				
DMG02	Member Birth Date	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-DOB	
DMG02	Member Birth Date	R	MMIS	Recip-Elig-File	RECIP-DATE-OF-BIRTH	
-						

SegID	HIPAA Name	Req	System	File	Field	Comment
DMG02	Member Birth Date	R	SSPS	SSPS-Enrollment-AuthMain	P_R_birth_date	
DMG03	Gender Code	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-SEX-CD	Map codes
DMG03	Gender Code	R	MMIS	Recip-Elig-File	RECIP-SEX-CODE	Map codes. "F"="2", "M"="1"
DMG03	Gender Code	R	SSPS			If DOB is sent, gender must be sent also. Which field?
DMG05	Race or Ethnicity Code	S	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-RACE-CD	use race?
DMG05	Race or Ethnicity Code	S	MMIS	Recip-Elig-File	RECIP-RACE-CODE	Use race?
DMG06	Citizenship Status Code	S	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-ALIEN-IND	use citizenship status?
DMG06	Citizenship Status Code	S	MMIS	Recip-Elig-File	ALIEN-IND	Use citizenship status?
ICM	Member Income	s				
AMT	Member Policy Amounts	s				
AMT01	Amount Qualifier Code	R	ACES			"C1"-co-payment
AMT01	Amount Qualifier Code	R	MMIS			"C1"-co-payment or "D2"- deductible or "P3"-premium amounts
AMT02	Contract Amount	R	ACES			If program is CHIP, send \$5.00 copay amount. Hard code?
AMT02	Contract Amount	R	MMIS			If needed, put copay or deductible or premium amounts here
HLH	Member Health Information	s				
HLH01	Health Related Code	S	SSPS			Required if avail: "S"-substance abuse, "T"-tobacco use.
HLH02	Member Height	S	SSPS			Required if available
HLH03	Member Weight	S	SSPS			Required if available
LUI	Member Language	s				
LUI02	Language Code	S	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-PRIM-LANG- IND	Map codes

SegID	HIPAA Name	Req	System	File	Field	Comment
LUI02	Language Code	S	MMIS	Recip-Elig-File	PRIMARY-LANG-IND	need to map codes
NM1	Incorrect Member Name	S	MMIS			When member's name, SSN, sex, DOB changes, MMIS must store old values to send here.
NM1	Incorrect Member Name	S				
DMG	Incorrect Member Demographics	S				
DMG	Incorrect Member Demographics	S	SSPS			Required if DOB or gender change.
NM1	Member Mailing Address	S				
NM1	Member Mailing Address	S				
N 3	Member Mail Street Address	S				
N 4	Member Mail City, State, Zip	S				
NM1	Member Employer	S				
NM1	Member Employer	S				
PER	Member Employer Communications Numbers	S				
N 3	Member Employer Street Address	S				
N 4	Member Employer City, State, Zip	S				
NM1	Member School	S				
NM1	Member School	S				
PER	Member School Commmunications Numbers	S				
N 3	Member School Street Address	S				
N 4	Member School City, State, Zip	S				
NM1	Custodial Parent	S				
NM1	Custodial Parent	S	SSPS			Does SSPS have HOH-head of household info?

SegID	HIPAA Name	Req	System	File	Field	Comment
NM1	Custodial Parent	S				
NM101	Entity Identifier Code	R	ACES			Hard code "S3"-custodial parent
NM103	Custodial Parent Last Name	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-AU-HOH-NAME	
NM108	Identification Code Qualifier	S	ACES			Only a code "34" for SSN, but we have client ID.
NM109	Custodial Parent Identifier	S	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-HOH-CL-ID- NUM	
PER	Custodial Parent Communications Numbers	S				
N 3	Custodial Parent Street Address	s				
N 4	Custodial Parent City, State, Zip	s				
NM1	Responsible Person	S				
NM1	Responsible Person	S				
PER	Responsible Person Communications Numbers	S				
N 3	Responsible Person Street Address	s				
N 4	Responsible Person City, State, Zip	S				
DSB	Disability Information	S				
DSB	Disability Information	S				
DSB01	Disability Type Code	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-DISAB- TYPE-CD	map codes
DSB01	Disability Type Code	R	MMIS	Recip-Elig-File	RECIP-DISABLITY-COD	map codes
DTP	Disability Eligibility Dates	S				
HD	Health Coverage	S				
HD	Health Coverage	S				
HD 01	Maintenance Type Code	R	ACES			Hard code "030"-audit or compare

SegID	HIPAA Name	Req	System	<i>File</i>	Field	Comment
HD 01	Maintenance Type Code	R	MMIS			Hard code "030"-audit or compare
HD 01	Maintenance Type Code	R	SSPS			Hard code "030"-audit or compare
HD 03	Insurance Line Code	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-PGM-CD	map codes
HD 03	Insurance Line Code	R	MMIS			If program is HMO, send "HMO; if tribal clinic, send "PPO". How are tribes enrolled? ask Michelle Senn.
HD 03	Insurance Line Code	R	SSPS			Need to select pertinent coverage type codes from HIPAA standard codes, p. 129.
HD 04	Plan Coverage Description	S	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-MATCH-CD	Map codes to list of legend text on ID cards
HD 04	Plan Coverage Description	S	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-MED-CD	Map codes to list of legend text on ID cards
HD 04	Plan Coverage Description	S	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-PGM-CD	Map codes to list of legend text on ID cards
HD 04	Plan Coverage Description	S	MMIS	Plan-File	GROUP-NUMBER	PCOP-type: "C"-capitated or "P"-PCCM (tribal). Group-number is the HMO's name. Must also indicate CSHCN clients. Need to develop logic to determine what to put here.
HD 04	Plan Coverage Description	S	MMIS	Recip-Elig-File	PCOP-TYPE	PCOP-type: "C"-capitated or "P"-PCCM (tribal). Group-number is the HMO's name. Must also indicate CSHCN clients. Need to develop logic to determine what to put here.
HD 05	Coverage Level Code	S	MMIS			Hard code "IND"-individual
DTP	Health Coverage Dates	R	MMIS			Two DTP segments, one for begin date, one for end date.
DTP01	Date Time Qualifier	R	ACES			Send "473" with recip-elig-beg- date; send "474" with recip-elig- end-date

SegID	HIPAA Name	Req	System	File	Field	Comment
DTP01	Date Time Qualifier	R	MMIS			Send "473" with pcop-begin-date; send "474" with pcop-end-date
DTP01	Date Time Qualifier	R	SSPS			Send "473" with recip-elig-beg- date; send "474" with recip-elig- end-date
DTP03	Coverage Period	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-ELIG-BEG- DT	
DTP03	Coverage Period	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-ELIG-END- DT	
DTP03	Coverage Period	R	MMIS	Recip-Elig-File	PCOP-BEGIN-DATE	
DTP03	Coverage Period	R	MMIS	Recip-Elig-File	PCOP-END-DATE	
DTP03	Coverage Period	R	SSPS	SSPS-Enrollment-AuthSvc	Service_Begin_Date	
DTP03	Coverage Period	R	SSPS	SSPS-Enrollment-AuthSvc	Service_EndDate	
AMT	Health Coverage Policy	s				
REF	Health Coverage Policy Number	s				
IDC	Identification Card	s				
LX	Provider Information	S				
LX	Provider Information	S	ACES			There is no provider info in the ACES extract to MMIS.
LX	Provider Information	s	SSPS			This provider loop is only used for the client's primary health care providers. Do not use this loop for social service providers; send provider detail in 278.
LX	Provider Information	s				
LX 01	Assigned Number	R	MMIS			Hard code "1"
LX 01	Assigned Number	R	SSPS			Generate a sequential number "1", "2", etc. for one or more providers assigned to this client.

SegID	HIPAA Name	Req	System	File	Field	Comment
NM1	Provider Name	R				
NM103	Provider Last or Organization Name	S	MMIS	Prov-File	PROV-NAME	
NM103	Provider Last or Organization Name	S	SSPS	SSPS-Enrollment-ProvMain	Vendor_Name	
NM104	Provider First Name	S	SSPS	SSPS-Enrollment-ProvMain	Vendor_Name	
NM105	Provider Middle Name	S	SSPS	SSPS-Enrollment-ProvMain	Vendor_Name	
NM108	Identification Code Qualifier	S	MMIS			"XX"-NPI, or "FI"-TaxID, or "34"- SSN
NM109	Provider Identifier	S	MMIS	Recip-Elig-File	PCOP-PERFORM-PROV	
NM109	Provider Identifier	S	SSPS	SSPS-Enrollment-ProvMain	Provider_Number	
N 4	Provider City, State, ZIP Code	s				
N 401	Member City Name	R	MMIS	Prov-File	PROV-CITY	
N 402	Member State Code	R	MMIS	Prov-File	PROV-STATE	
N 402	Member State Code	R	SSPS	SSPS-Enrollment-ProvMain	Vendor_State	
N 403	Member Postal Zone or Zip Code	R	MMIS	Prov-File	PROV-ZIP-CODE	
N 403	Member Postal Zone or Zip Code	R	SSPS	SSPS-Enrollment-ProvMain	Vendor_Zip	
PER	Provider Communications Numbers	S				
PER01	Contact Function Code	R	SSPS			Will Always be "IC"
PER04	Communication Number	R	MMIS	Prov-File	PROV-TELE-NUM	
PER04	Communication Number	R	SSPS	SSPS-Enrollment-ProvMain	Provider_Phone_Area_Code	
PER04	Communication Number	R	SSPS	SSPS-Enrollment-ProvMain	Provider_Phone_Number	
PLA	PCP Change Reason	s				
СОВ	Coordination of Benefits	S				
СОВ	Coordination of Benefits	S				

SegID	HIPAA Name	Req	System	File	Field	Comment
COB01	Payer Responsibility Sequence Number Code	R	MMIS			Hard code "P"-Primary
COB02	Insured Group or Policy Number	S	MMIS	Recip-Elig-File	POL-CERT-NUM	
COB03	Coordination of Benefits Code	R	ACES	MMIS-Elig-Extract-Rec	W40-MMIS-CL-TPL-MED- INSUR	Flag for COB
COB03	Coordination of Benefits Code	R	MMIS			if TPL data present, hard code "1", else "6"
REF	Additional Coordination of Benefits Identifiers	S				
REF01	Reference Identification Qualifier	R	MMIS			Hard code "6P"-Group Number or "SY"-Social Security Number
REF02	Insured Group or Policy Number	R	MMIS	Recip-Elig-File	GROUP-NUMBER	
REF02	Insured Group or Policy Number	R	MMIS	Recip-Elig-File	SSN-OF-INSURED	
N 1	Other Insurance Company Name	S				
N 101	Entity Identifier Code	R	MMIS			Hard code "IN"-Insurer
N 102	Insurer Name	S	MMIS	Recip-Elig-File	CARRIER-NAME	
N 103	Identification Code Qualifier	S	MMIS			Hard code "FI"-Tax ID or "XV"- National PlanID
N 104	Insured Group or Policy Number	S	MMIS	Recip-Elig-File	CARRIER-ID	Need to store external IDs, not current local ones.
DTP	Coordination of Benefits Eligibility Dates	s				
DTP01	Date Time Qualifier	R	MMIS			Hard code "344"-COB Begin or "345"-COB End
DTP03	Coordination of Benefits Date	R	MMIS	Recip-Elig-File	COV-BEGIN-DATE	
DTP03	Coordination of Benefits Date	R	MMIS	Recip-Elig-File	COV-END-DATE	
SE	Transaction Set Trailer	R				
SE 02	Transaction Set Control Number	R	SSPS			Important for error checking